

PUBLIC VOUCHER FOR PURCHASES AND  
SERVICES OTHER THAN PERSONAL

D. O. Vou. No. \_\_\_\_\_

Bu. Vou. No. \_\_\_\_\_

362

U. S. COST REIMBURSABLE

(Department, bureau, or establishment)

Voucher prepared at \_\_\_\_\_

(Give place and date)

THE UNITED STATES, Dr.,

Payee's Account No. 1311

To \_\_\_\_\_

(Payee)

PAID BY

SAPC 8761

COPY 1 OF 3

(Address)

(City)

(State)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Costs				25,388	75 ✓

## PAYMENT:

Complete ☐  
 Partial ☐  
 Final ☐

Use continuation sheet(s) if necessary

Shipped from \_\_\_\_\_

to \_\_\_\_\_

Weight \_\_\_\_\_

Government B/L No. \_\_\_\_\_

Total \$

25,388

75 ✓

I certify that the above bill is correct and just and that payment has not been received.

(Payee must NOT use this space)

Differences \_\_\_\_\_

Date 8 \_\_\_\_\_

Per \_\_\_\_\_

Amount verified; correct for \_\_\_\_\_

25,388

75 ✓

(Signature or initials)

Contract No. A101

Date \_\_\_\_\_

Req. No. \_\_\_\_\_

Date \_\_\_\_\_

Invoice Rec'd. \_\_\_\_\_

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ \_\_\_\_\_

By \_\_\_\_\_

Title \_\_\_\_\_

SIGN  
ORIGINAL  
ONLY

Title \_\_\_\_\_

Date \_\_\_\_\_

(Approving Officer)

SEP 15 1956

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. \_\_\_\_\_ dated \_\_\_\_\_, 19\_\_\_\_, for \$ \_\_\_\_\_ } on Treasurer of the United States in  
 { Cash, \$ \_\_\_\_\_, on \_\_\_\_\_, 19\_\_\_\_. Payee \_\_\_\_\_ } favor of payee named above.

(Sign original only)

\* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporation must be given as the name of the company or corporation. One must write "John Doe Company, Inc. Secretary, or Treasurer, as the case may be."  
 † If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ \_\_\_\_\_", and over his official title.

Title \_\_\_\_\_

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400110029-5  
STATOTHR

Approved For Release 2000/04/12 : CIA-RDP64-00360R000400110029-5

FORM 100-2 (4-55)										ACCOUNTS PAID										REPORT NO.									
<input type="checkbox"/> CHECK REGISTER <input type="checkbox"/> CHARGE DISTRIBUTION CLEARING LIST <input type="checkbox"/> DETAIL DIRECT DISTRIBUTION										<input type="checkbox"/> DETAIL INDIRECT DISTRIBUTION <input type="checkbox"/> SUMMARY DIRECT POSTING JOURNAL <input type="checkbox"/> SUMMARY INDIRECT POSTING JOURNAL FOR OPERATING DIVISIONS										<input type="checkbox"/> CONSOLIDATED DISTRIBUTION REPORT <input type="checkbox"/> ADJUSTMENTS									
COST CENTER			DATE			CHECK NUMBER	PAYEE'S (ABBREV.) NAME	PURCHASE ORDER OR INVOICE NUMBER	RECEIVING REPORT NUMBER	C.E. CODE	CHARGE DISTRIBUTION				DISTRIBUTION AMOUNT														
MAJ	INT	SUB	MO	DAY	YR						ACCOUNT	M.J.O.	S.O.	WORK ORDER															
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	12		823														
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	12		823														
25	20	20	07	23	6	50972	CONN SUPPL	528575	8629	5	12700	5024	13		8064														
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	13		359														
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	13		8064														
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	15		1165														
25	20	20	07	23	6	50964	PETTY CASH	U		5	12700	5024	15		1165														
25	20	30	07	23	6	50996	AUDIO DEV	528254	7159	5	12700	5024	28		40415														
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															7739														
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Total this page  
 JV # 066123  
 Total